

JAN 27 2005  
PATENT & TRADEMARK

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U.S. Foreign and Domestic Office, U.S. DEPARTMENT OF COMMERCE  
to a collection of information within a discipline or a world area, regional country.

## PATENT APPLICATION FEE DETERMINATION RECORD

**Assignment or Docket Number**

ALR03A

**CLAIMS AS FILED - PART I**

**Schwarz**

**October 2,**

## SMALL ENTITY

CR

OTHER THAN  
SMALL ENTITIES

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.140)				\$ 355	OR	\$ _____
TOTAL CLAIMS (37 CFR 1.140)	28	minus 20 =	8	\$ 9 = 72	OR	\$ _____ =
INDEPENDENT CLAIMS (37 CFR 1.140)	5	minus 1 =	2	\$ 40 = 80	OR	\$ _____ =
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.140)	N/A				OR	
			TOTAL	507	OR	TOTAL

\* If the difference in column 1 is less than zero, enter "0" in column 2

• If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

:(October 12)

**Section 23**

«Column 3»

**:SMALL ENTITY**

**Q28**

**OTHER THAN  
SMALL ENTITY**

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	Total (17 CFR 1.1402)	* 28	Minus	** 28	= 0	\$ 9 -	0	OR	\$ 1 -	
	Independent (17 CFR 1.1402)	* 5	Minus	*** 5	= 0	\$ 45 -	0	OR	\$ -	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (17 CFR 1.1402)					+ -	0	OR	-	
	TOTAL						0	OR	TOTAL	

**(Category 1)**

(Column 1)

**(Column 3)**

**ADDITIONAL FEE**

**ADDITIONAL FEE**

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	Total 17 CFR 1.2409	* 31	Minus	** 28	= 3	\$ 9 -	27	OR	\$ -	
	Independent 17 CFR 1.2409	* 6	Minus	*** 5	= 1	\$ 44 -	44	OR	\$ -	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 17 CFR 1.2409					-	0	OR	-	
						TOTAL	71	OR	TOTAL	

(Colman 1997)

(Column 2)

**(Odkaz 3)**

**ADDIT. FEE**

**ADDIT. FEE**

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA.	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (17 CFR 1.246-2)	*	Minus	**	=	1.5	=	OR 1.5	=
	Independent (17 CFR 1.246-2)	*	Minus	***	=	2	=	OR 2	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.246-2)					=	=	OR	=
						TOTAL		OR	TOTAL

\* If the entry in column 1 is less than the entry in column 2, write "V" in column 2.

\*\* If the "Mailing Number Previously Paid For" IN THIS SPACE is less than 25, enter "00"

\*\* If the "FBI has Not Yet Approved" Print In THIS SPACE - like top 1 page 3

The "Highest Number Permissibly Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**Bartholomew Statement:** This form is estimated to take 0.2 hours to complete. (Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent as the Chief Information Officer, C.S. Peters and Bartholomew Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Peters, Washington, DC 20231.

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